DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: BOHLMAN MANOR INC (0010931)

Address: 401 CENTER STREET, BIRNAMWOOD, WI 54414

License Status: REGULAR

Licensed/Certified/Registered 02/01/2006

Regional Office: NORTHERN REGION (RHINELANDER), (715) 365-2800

Survey History

Compliance

Verified

Corrected

Survey ID: 0096681 End Date: 03/16/2006 Type: STANDARD Purpose: SURVEY/COMPLAINT/SELF REPORT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10009529 Served 04/05/2006

Deficiencies Cited Subject Area

83.32(2)(a)5 HARMFUL BEHAVIOR PATTERNS

Survey ID: 0095391 End Date: 07/27/2005 Type: INITIAL Purpose: SURVEY

Results: PROBATIONARY LICENSE ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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STATE OF WISCONSIN Bureau of Quality Assurance P.O. Box 2969 Madison WI 53701-2969

Complaint History

Date Complaint Received: 01/26/2006 Date Investigation Completed: 03/14/2006

Subject Area(s) Result SOD#

RESIDENT BEHAVIOR/FACILITY PRACTICE PHYSICAL PLANTS & SAFETY HAZARDS NUTRITION & FOOD SERVICES NOT SUBSTANTIATED **MEDICATIONS** NOT SUBSTANTIATED **ADMINISTRATION** NOT SUBSTANTIATED

NOT SUBSTANTIATED NOT SUBSTANTIATED